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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)		Application No.	10/618,285
		Filing Date	July 11, 2003
		First Named Inventor	SCHWIETERS, et al.
		Examiner Name	Hashmi, Zia R.
		Group Art Unit	2881
Total Number of Pages in This Submission	7	Attorney Docket No.	A-72356/AJT (466984-22)
<b>ENCLOSURES</b> (check all that apply)			
<input checked="" type="checkbox"/> Amendment Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group	
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences	
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
<input type="checkbox"/> Final Office Action	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information	
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter	
<input checked="" type="checkbox"/> Extension of Time Request -- One Month	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Check in the amount of \$110.00 for one-month extension of time; and a Return Postcard	
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer		
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund		
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, No. of CD(s) _____		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53			
<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm or Individual name	Aldo J. Test, Reg. No. 18,048 DORSEY & WHITNEY LLP 4 Embarcadero Center, Suite 3400 San Francisco, CA 94111 Telephone 415-494-8700		Customer Number 32940
Signature			
Date	August 31, 2004		
<b>CERTIFICATE OF MAILING</b>			
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:			8/30/04
Typed or printed name	Leslie Hoffmann		
Signature		Date	August 30, 2004